

DO/ EO WORKSHEET

India Evans, Patent Application Specialist/ National Stage Division

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1. <input checked="" type="checkbox"/> same as 371 request date 2. _____ 3. _____ |
| <input type="checkbox"/> Description <input checked="" type="checkbox"/> Claims <input checked="" type="checkbox"/> Abstract
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<input type="checkbox"/> entered <input type="checkbox"/> not entered :
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| <input type="checkbox"/> Power of Attorney | <input type="checkbox"/> Verified Small Status Statement |
| <input type="checkbox"/> Change of Address | <input type="checkbox"/> Oath/ Declaration (executed) |
| | <input type="checkbox"/> Oath/ Declaration <input type="checkbox"/> unsigned <input type="checkbox"/> no citizenship <input type="checkbox"/> other |
| | <input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing |
| | <input type="checkbox"/> Other : _____ |

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